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Complete and send t	this form, together wi	applicable fee(s),	to: <u>Mail</u> or <u>Fax</u>	Mail Stop ISSUE Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000	or Patents	-
INSTRUCTIONS: This for appropriate: All further co-indicated unless corrected maintenance fee notification	orm should be used in the tresponder of hall the the below or directed otherwises.	Patent, advance orders are in Block 1, by (a) speci	and PUBLIC nd notification fying a new c	OATION FEE (if required of maintenance fees worrespondence address)	ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as urate "FEE ADDRESS" for
	ompany 10/01/20	04 RMEBRAH1 0000007		Fee(s) Transmittal. The papers. Each additions have its own certificate. Let I hereby certify that the States Postal Service addressed to the Mai	mailing can only be used fis certificate cannot be used all paper, such as an assignme of mailing or transmission. rtificate of Mailing or Transmis Fee(s) Transmittal is bein with sufficient postage for fit I Stop ISSUE FEE address TO (703) 746-4000, on the control of the co	for any other accompanying ent or formal drawing, must smission g deposited with the United st class mail in an envelope above, or being facsimile
Rochester, 141 170	01 FC:15 02 FC:15		300	Sup	etenber 28,	Signatore)
APPLICATION NO.	FILING DATE	FIRST	NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/944,971 TITLE OF INVENTION: II	68/31/2001 NK JET RECORDING ELE		idhar Sadasiva	n	83173BBC	2204
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PC	IBLICATION PEE	TOTAL FEE(S) DUE	DATE DUE
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HESS, E	I	428-032290	,			
CFR 1.363). Change of correspond Address form PTO/SB/1 The Address indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	ion (or "Fee Address" Indict or more recent) attached. Use D RESIDENCE DATA TO Is an assignce is identified by a 37 CFR 3.11. Completion	Correspondence (1) or a (2) register of a Customer 2 resister BE PRINTED ON THE PARENCE of this form is NOT a sub-	the names of a gents OR, alter the name of a stered attorney gistered patent d, no name with TENT (print of the control of the	single firm (having as a y or agent) and the nam attorneys or agents. If il be printed. or type) he patent. If an assign g an assignment.	at attorneys a member a less of up to no name i	s P. Konkol
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4a. The following fee(s) are	enclosed:	db. Payın U.A.c. d) S.Pay Q. The	ent of Fee(s): heck in the am ment by credit	ount of the fee(s) is enc card. Form PTO-2038 creby authorized by ch	losed.	credit any overpayment, to
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NOTE: The Issue Fee and P		will not be accepted from a	anyone other th		y paid issue fee to the applica stered attorney or agent; or th	
(Authorized Signature)	Leipold /	pc (Date) 9-27-		an actain a homofic has	ha saktion hish in to \$1. (au	The des Depro
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